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U.S. DISTRICT COURT
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S.D. OF N.Y.W.P.

April 6, 2025

Hon. Robert Cave
Southern District of New York
500 Pearl Street
New York, NY 10007

Re: Continuous Denial of Prescription Drug Coverage under Violation of the ACA and ADA

Case Title: Lucio Celli v. Pres Trump et al.
Case No.: 2025-cv-02031

Dear Magistrate Judge Cave,

I am writing to formally address the continuous denial of prescription drug benefits under my health insurance from the City of New York, which has persisted since November 27, 2024. This ongoing issue has caused significant hardship and threatens my health, if not solved soon. If not resolved soon, it will violate federal laws, including the Affordable Care Act (ACA) and the Americans with Disabilities Act (ADA).

1. The Office of Labor Relations processed my retirement health benefits in less than 40 days
2. The UFT Welfare Fund has provided me information and has already paid for dental work with information centered on my vision coverage.
3. Ms. Mary Atkinson has contacted me and is working on the issue, which I hope will solve this issue—cross your fingers

Issues

4. PICA program handles injectable (diabetes), psychotropics and other items
5. The UFT continuous that the City of New York provides prescription drug coverage for retirees and the City continuous to claim that the various unions provide drug coverage for active employees and retirees
6. At the moment, I have fine with my HIV medication because I was able to refill them prior to Medicaid cut me off and I should have 12 or 11 weeks.
7. I am now without psychiatric, like anxiety, depression, bipolar and other one
8. I have some insulin and metformin, but I doubt it will last longer than a month

9. Then, there are meds that I will run out soon.
10. Mounjaro is not a big deal to go without, in my opinion, because the other meds will be fine.
11. I have no control over who which entity that is responsible, but I would like to point out that in Dec of 2022, I went without HIV medication for an entire month—this time the DOE and the City have had months to get their act together.

Under Section 1557 of the ACA (42 U.S.C. § 18116), health programs and insurers that receive federal funds are prohibited from discriminating on the basis of disability. Your actions in systematically denying coverage for medically necessary prescriptions critical to my condition demonstrate a clear violation of this provision. Courts have recognized this protection, including in *Schmitt v. Kaiser Foundation Health Plan*, 965 F.3d 945 (9th Cir. 2020), which held that Section 1557 prohibits healthcare coverage policies that have a disparate impact on disabled individuals. Further, the 9th Cir. held that Section 504 broadly provides that "[n]o otherwise qualified individual with a disability ... shall, solely by reason of her or his disability, be excluded from the participation in, be denied the benefits of, or be subjected to discrimination under any [federally funded] program or activity." 29 U.S.C. § 794(a).

Furthermore, under the ADA (42 U.S.C. § 12101 et seq.), insurers may not impose eligibility criteria or benefit limitations that unfairly target individuals with disabilities. In *Alexander v. Choate*, 469 U.S. 287 (1985), the Supreme Court affirmed that facially neutral policies may violate the ADA if they disproportionately burden disabled individuals. Your continued denial of my prescribed medications, essential for the treatment of my disability, meets this threshold. According to my retired friends and Facebook group, they have all claimed that the UFT is the one who provides prescription drug coverage, and nothing changes from being an active employee to a retiree employee

I look forward to the Court's response and stand ready to submit any additional materials or filings necessary to proceed. I have other claims that I would like to add

Sincerely,
Lucio Celli

